

PART B - FEE(S) TRANSMITTAL

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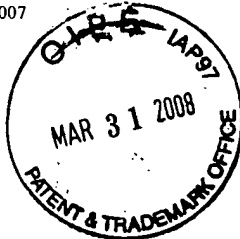
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12/31/2007

BACON & THOMAS, PLLC
 625 SLATERS LANE
 FOURTH FLOOR
 ALEXANDRIA, VA 22314



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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/510,233	09/21/2005	Martin Gehrke	GEHR3001/FJD	4864

TITLE OF INVENTION: MEASURING DEVICE USED IN PROCESS TECHNOLOGY, COMPRISING A CENTRAL POWER SUPPLY UNIT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	03/31/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
YACOB, SISAY	2612	340-870070

04/01/2008 HLE444	00000009 10510233
01 FC:1501	1440.00 OP
02 FC:1504	300.00 OP

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Endress + Hauser Conducta Gesellschaft fur Mess- u. Regeltechnik mbH + Co. KG
 Dieselstrasse 24, Gerlingen, Germany 70839

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies

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- ☒ A check is enclosed.
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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-0200 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Felix J. D'Ambrosio

Date March 31, 2008

Typed or printed name Felix J. D'Ambrosio

Registration No. 25,721

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